

## STATE OF WASHINGTON APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT



Application for Change

For filing with Ecology or with County Conservancy Boards

# A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.)  ☐ Change purpose(s) of use ☐ Add purpose(s) of use ☐ Change point(s) of diversion/withdrawal ☐ Add point(s) of diversion/withdrawal ☐ Change/transfer place of use ☐ Other (i.e. consolidation, intertie, trust water)  Explain:	CHANGE No. CS4-017  DATE ACCEPTED O	REC'D 12 18 104
**IF MORE SPACE IS NEEDED, ATTACH ADI	DITIONAL SHEETS (PLEASE PRIN	T OR TYPE CLEARLY)**
1. Applicant Information:		
APPLICANT/BUSINESS NAME  MountainStar Resort Development, LLC  Attention: George Cockill	PHONE NO. (509) 649-3902	FAX NO. (509) 649-3059
ADDRESS		
PO Box 887	-	
CITY	STATE	ZIP CODE
Roslyn	WA	98941-3059
CONTACT NAME (IF DIFFERENT FROM ABOVE)  Joe Mentor, Jr.  C/O Mentor Law Group, PLLC  ADDRESS	PHONE NO. (206) 493-2300	FAX NO. (206) 493-2310
2025 First Avenue, Suite 1100		
CITY Seattle	STATE WA	ZIP CODE 98121
a W. A. Britana		
2. Water Right Information:	DECORPTE WATER	1
WATER RIGHT OR CLAIM NUMBER CS4-01724(C)CTCL	RECORDED NAME(S)  MountainStar Resort Devel	opment IIC
DO YOU OWN THE RIGHT TO BE CHANGED? YES NO	Widumanistar Resort Devel	opment, LLC
IF NO, PROVIDE OWNER(S) NAME:		
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST	FIVE (5) YEARS? YES NO N	I/A
Please attach copies of any documentation that dewas established. Also, if you have a water system application.		
FOR OFF	FICE USE ONLY	
APP. NO PERMIT NO CE	ERT. NO CERT. OF C	CHANGE NO
REET 02-08-2005		C
ECY 040-1-97 (6/04)	4(c) CTCLC/	Application for Cha

### 3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Yakima River		SW	SE	27	20	15E		
Cle Elum River		SW	SE	30	20	15E		

**B.** Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Cle Elum River		NW	NE	14	20	14E		
Cle Elum River		E 1/2	SW	11	20	14E		
Cle Elum River		SW	SE	30	20	15E		
Yakima River		SW	SE	27	20	15E		

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☐ YES ☒ NO PROPOSED: ☒ YES ☒ NO - IF NO, PROVIDE OWNER(S) NAME:

City of Cle Elum

City of Cle Elum & MountainStar Resort Development, LLC

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

# 4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal Water Supply Purposes	0.5 cfs	92.54 AF/YR	April 1- October 15
Municipal Water Supply Purposes	0.13 cfs	2.29 AF/YR	October 16- March 31

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
No Change			

### 5. Place of Use:

A. Existing

roa corried by the Cla Flum and South Cla			
trea served by the Cie Elum and South Cie	Elum new regional water	r supply system locat	ed within the
urban growth boundaries for Cle Elum and	South Cle Elum establish	ed by Kittitas County	y. This place of
use lies within portions of Section 25, 26, 27	, 28, 29, 30, 31, 32, 33, 34, 3	35 and 36 of T. 20 N.,	R.15 E.W.M.
and Section 31 of T. 20 N., R. 16 E.W.M.		***************************************	
1/4 1/4 SEC. TWP. RGE.	COUNTY	PARCEL#	# OF ACRES
O YOU OWN ALL THE LANDS IN THE EXISTING PLACE	OF USE?   YES   NO-	IF NO. PROVIDE OWNER(S	) NAME:

#### **B.** Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED: Cle Elum and South Cle Elum new regional water supply sys

Area served by the Cle Elum and South Cle Elum new regional water supply system located within the urban growth boundaries for Cle Elum and South Cle Elum established by Kittitas County. This place of use lies within portions of Section 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35 and 36 of T. 20 N., R.15 E.W.M. and Section 31 of T. 20 N., R. 16 E.W.M. together with the area served by MountainStar Resort Resources, Inc. in accordance with a water system comprehensive plan or update approved by the Washington State Department of Health in Sections 11, 13, 14, 15, 23, 24 and 25 T. 20N., R. 14 E.W.M., and Sections 18, 19, 20, 21, 28, 29, 30 and 31, T. 20N., R. 15 E.W.M.

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? 

YES 
NO - IF NO, PROVIDE OWNER(S) NAME:

Municipal Water Supply Service Area

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

YES NO-IF YES, PROVIDE THE WATER RIGHT	TED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
	@ 3, CS4-YRBØ7CØ1724@ 4, CS4-YRBØ7CØ1724@ 5,
S4-YRBØ7CØ1724@ 6	o, cor most correct if cor most correct of
71 1100, 00 1, 210	
Remarks and Other Relevant Inform	nation:
FOR SEASONAL OR TEMPORARY, START DATE/	/END DATE/
	scise Tax liability for the seller of the water rights. The Department ial taxable water right related actions and therefore may be provided
	e for further information. The phone number is (360) 570-3265. Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.
Signatures:	
I certify that the information above is true	and accurate to the best of my knowledge. I understand that in
I certify that the information above is true order to process my application, I am here Conservancy Board access to the above si	and accurate to the best of my knowledge. I understand that in eby granting staff from the Department of Ecology or the Count ite(s) for inspection and monitoring purposes. If assisted in the derstand that all responsibility for the accuracy of the informat
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